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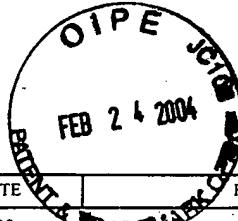
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23601 7590 12/04/2003

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/388,221	09/01/1999	JOHN REED C	P-LJ-3650	3565

TITLE OF INVENTION: NOVEL CARD PROTEINS INVOLVED IN CELL DEATH REGULATION

66654-523

• APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	03/04/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS	
WEHBE, ANNE MARIE SABRINA		1632		536-023100	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Burnham Institute

La Jolla, California

Please check the appropriate assignee category or categories (will not be printed on the patent); individual corporation or other private group entity government

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 A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 502624 (enclose an extra copy of this form).

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(Authorized Signature) Pamela M. Guy

(Date)

Feb. 24, 2004

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03 FC:8001	30.00 DA

TRANSMIT THIS FORM WITH FEE(S)



Document: Fee Transmittal – Part B
Attorney Client-Matter No: 66654-523

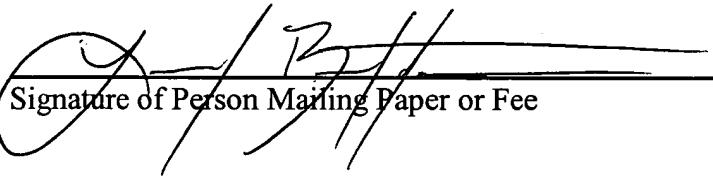
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PATENT
Client-Matter No.: 66654-523
(P-LJ 3650)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of) Group Art Unit: 1632
John C. Reed)
Serial No.: 09/388,221) Examiner: A. Wehbe
Filed: September 1, 1999) Confirmation No.: 3565
For: NOVEL CARD PROTEINS INVOLVED) Date of Notice of Allowance:
IN CELL DEATH REGULATION) December 4, 2003

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Sir:

Transmitted herewith are the following:

X 1. Form PTOL-85b (with duplicate copy);
 2. Supplemental Declaration for Patent Application;
 3. Communication regarding change in entity status from small to large.

Please charge my Deposit Account No. 502624 the amount of \$980.00, \$665.00 to cover the payment of the issue fee, \$300.00 to cover the payment of the publication fee, and \$300.00 to cover the advance order of copies. A duplicate of this sheet is enclosed.

Please charge any additional fees or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Date: February 24, 2004

Pamela M. Guy

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